State of 12e		
Kennthe Dy	<u>800</u> ,	
	Claimant,	

U.S. DISTRICT COURT - N.D. OF N.Y.

Claim

9:17-01-674

The state of.

Defendant.

- 1. The post office address of the claimant is: Sing Sing Correctional Facility, 354 Hunter Street, Ossining, New York 10562.
- 2. This claim arises from the acts or omissions of the defendant. Details or said acts or omissions are as follows: On April 17th, 2017, Claimant Kennthe green housed in sing sing correctional facility. WAS Jumped by approxiately (5) imates inside sing Sing Correctional Facility's B-Block yard, This incident happened approximately 9:00pm, Claimant was hit from behind than Savagely Kicked, punched, & Stomped About the head toped body to the point of unconecienceness, while in the presence of correctional profficers. AS A TESUIT, Claimant was sent out by E.M.T to phelps medical hospital because the Claimant Sustained

Severe head truma and Lost of vision in his right exe,
Claimant also didn't remember his name or known where he was
3. The place where the act(s) took place is: Sing Sing Correctional
Carilitia na-lla Pa Disak
FACILITY'S north B-Block yard, At Approximately
9:00 pm. April 17th, 2017,
4. This claim accrued on the May of April, 2014, at 9:00 clock.
5. Identifying the items of damage or injuries claimed to have been sustained:
Claimant Lost All vision in his Right eye.
CHIMANT IS SUFFETURE SEVETE HEAT
Truma. #3 Claimant is A180 suffering from
A Severe injury in Claimants private ATEA,
from multiple kicks and stomp's to that ATEA.
6. (Check appropriate box):
This claim is served and filed within 90 days of accrual.  OR
A Notice of Intention to File a Claim was served on June 5, 2014, which was within 90 days of accrual.  OR
This is a claim by a correctional facility inmate to recover damages for injury to or
loss of personal property and it is served within 120 days of the exhaustion of
claimant's administrative remedies
By reason of the foregoing, Claimant was damaged in the amount of \$ 250 cm and
Claimant demands judgment against the Defendant(s) for said amount.

Kennthe Dyson Claima

## VERIFICATION

State of New York)
) ss.:

County of Westchester)

Venille Direct, being duly sworn, deposes and says that deponent is the Claimant in the within action; that deponent has read the foregoing Claim and knows the contents thereof; that the same is true to deponent's own knowledge, except as to matters therein stated to be alleged upon information and belief, and that as to those matters, deponent believes it to be true.

Kennthe Dyson

SWORN TO BEFORE ME THIS

14 DAY OF DUNC , 2017

NOTARY PUBLIC



## SERVICE AND FILING INSTRUCTIONS

You must serve a copy of the claim in accordance with Court of Claims Act section 11(a) and you must file the original and two copies, with proof of service, and the filing fee of \$50.00 or an application for waiver or reduction of the filing fee, with the Clerk of the Court of Claims

FAILURE TO AFFECT PROPER AND TIMELY SERVICE AND FILING MAY RESULT IN DISMISSAL OF YOUR CLAIM.

New York State Court of Claims Justice Building, P.O. Box 7344 Albany, New York 12224 (518) 432-3411